

WHITE FLASHING LIGHT PERMIT INSTRUCTIONS

DIRECTIONS TO ISSUE A WHITE FLASHING LIGHT PERMIT:

1. Complete this form.
2. Print and keep signed copies on file at the service, while the permit remains active.
3. When a permit is issued, log into the System Registry, select the provider on the service roster and enter the requested information within 15-days.
4. **DO NOT SEND COPIES TO THE BUREAU OF EMERGENCY AND TRAUMA SERVICES.**

INFORMATION FOR THE PERMIT HOLDER:

The Service Director or IDPH may approve or deny an application. IDPH may place on probation, suspend or revoke a permit if the Service Director or IDPH finds reason to believe the applicant failed to follow the rules governing white flashing lights, has been convicted of a moving violation while using white flashing lights, has utilized a white flashing light without a permit, does not have a valid driver's license or does not have a current vehicle registration.

1. Read and abide by Iowa Administrative Code section 641—133(147A) - the latest version of which can be found at <http://idph.iowa.gov/BETS/EMS/rules>.
2. Iowa law permits the use of white flashing lights for identification of emergency providers who are responding to an emergency, at the scene of an emergency and while transporting a patient during a disaster.
3. Displaying white flashing lights does not grant the right of way; the light is for identification purposes only.
4. White flashing lights do not permit the vehicle operator to violate laws governing vehicle operation.
5. A permit must be issued for each vehicle and a copy of the permit must be carried in the vehicle.
6. Operators of a vehicle with white flashing lights must maintain a current vehicle registration, liability insurance and a valid driver's license.
7. White flashing lights may be used in conjunction with red or blue flashing lights if the appropriate permits are maintained.

Permit Holder Information			
First Name:	Last Name:		
Physical Address:	City:	State:	Zip:
Registered Vehicle Owner (if different than above):			

I hereby certify that the information on this permit is correct. I agree to use white flashing lights in accordance with Iowa law and administrative rules.

Signature:	Date:
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COMPLETED BY THE SERVICE DIRECTOR

THIS PERMIT EXPIRES 5-YEARS FROM THE DATE OF ISSUE.

Date Permit Issued:	
Service Name:	Service City:
Service Director's Name	Phone:
Email Address:	

I hereby certify that the individual named on this permit is a member in good standing with this service.

Signature:	Date:
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